



ANKLE ARTHROSCOPY WITH LIGAMENT RECONSTRUCTION (BROSTROM REPAIR) REHABILITATION PROTOCOL

General notes:

- “As tolerated” should be understood to be with safety for the hip; pain, limp, swelling, or other undesirable factors are indicators that you are doing too much too soon. If any of these should occur, decrease activity level, ice and elevate the leg.
- Avoid forceful active and passive range of motion (ROM) as well as ankle joint mobilization and inversion for the first four weeks.
- Monitor surgical sites for mobility and scar formation; soft tissue treatments (i.e. scar mobilization and friction massage) may be utilized to decrease fibrosis.
- Rehabilitation should be monitored closely for signs of compensation or guarding.
- Non-weight bearing in cast for the first two weeks; non-weight bearing in boot for weeks two – four; partial weight-bearing in boot for weeks four – six, progressing to full weight-bearing by week six.
- Aerobic and general conditioning may be maintained throughout the rehab process.
- Ice should be applied to the ankle for 15-20 minutes following each exercise, therapy, or training session.
- Return to sport based on provider team input and appropriate testing.
- All times and exercises are to serve as guidelines. Actual progress may be faster or slower, depending on each individual patient, as agreed upon by the patient and his/her team of providers.

Weeks 0 to 2

Weight Bearing:

NWB (non weight bearing) in cast, must use crutches

Therapeutic Exercises:

- Strengthening: Quad sets (squeeze thigh muscles tight), 4-way SLR (four directions straight leg raises: forward, backward, inside, outside), knee extension (straightening) and flexion (bending) exercises; weight training may be done if NWB on surgical foot
- Conditioning: Stationary bike without using involved foot, UBE (upper body exercise bike)
- Cryotherapy (Ice treatments): Six to eight times a day for 20 minutes

Weeks 2 to 4

Weight Bearing:

NWB in boot, continue with crutches

Therapeutic Exercises:

- Toe curls/spreads, ankle alphabets, ankle circles clockwise/counter clockwise, gentle towel stretch
- Strengthening: Remains the same as weeks 0 to 2
- Conditioning: Remains the same as weeks 0 to 2
- Manual Therapy: Soft tissue massage, scar tissue massage



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Weeks 4 to 6

Weight Bearing:

Partial weight bearing in boot, progress to full weight bearing in boot, continue with crutches as needed

Therapeutic Exercises:

Toe curls/spreads, ankle alphabets, ankle circles clockwise/counter clockwise, gentle towel stretch

- *Strengthening: As weeks 0 to 2*
- *Proprioception: Weight shifting*
- *Conditioning: Remains the same as weeks 0 to 2, may begin swimming*
- *Manual Therapy: Soft tissue massage, scar tissue massage, joint mobilization*

Weeks 6 to 8

Weight Bearing:

Full weight bearing, no crutches

Therapeutic Exercises:

Continue with ankle ROM activities

- *Strengthening: Unrestricted weight training, closed chain exercises, core strength training*
- *Proprioception: Weight shifting, single leg balance activities*
- *Conditioning: Stationary bike, treadmill, swimming*
- *Manual Therapy: Soft tissue massage, scar tissue massage, joint mobilization*

Weeks 8 to 12

Therapeutic Exercises:

- Strengthening: Progress strengthening as tolerated
- Proprioception: Weight shifting, balance activities
- Conditioning: Stationary bike, treadmill, stair climber, elliptical machine, ski machine; begin straight running outside

Week 12 to 6 months

Therapeutic Exercises:

Conditioning: Progress all activities towards returning to sports; include plyometrics and cutting/agility drills